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# **EFFICIENT MOTOR & ENGINEERING WORKS PTE LTD**

37 LOYANG WAY, SINGAPORE 508734

**VEHICLE NO: GBJ3590S** 

MAKE & MODEL: TOYOTA HIACE HIACE DX 2.8 AUTO

CLAIM TYPE :

DATE:

7 Dec 2021

CHASSIS NO: GDH2012004127

D.O.A:

OD CLAIM 6 Dec 2021

TO:

INDIA INTERNATIONAL INSURANCE

# **ADJUSTMENT ON REPAIR COST & REPLACEMENT OF PARTS**

/No.	QTY	DESCRIPTION	CONDITION / REMARKS	UNIT LIS	T PRICE	TOTAL LIST	PRICE
1	1	FRONT BUMPER / BR		\$	170.00	\$	170.0
2	1	FRONT BUMPER GRILLE / DR		\$	60.00	\$	60.0
3	2	FRONT BUMPER SIDE RETAINER LH/RH / B	(	\$	55.00	\$	110.0
4	21	FRONT BUMPER FOG LAMP COVER LH (RH)	BR	\$	40.00	\$	80.08
5	1	FRONT BUMPER REINFORCEMENT	00	\$	90.00	\$	90.0
6	1	FRONT BUMPER CENTER BEAM / 00		\$	45.00	\$	45.0
7	1	FRONT GRILLE TOP / BR		\$	90.00	\$	90.0
8	1	FRONT GRILLE LOWER / BK		\$	120.00	\$	120.0
9	1	FRONT GRILLE INNER / DR		\$	170.00	\$	170.0
10	2	HEADLAMP ASSY LH/RH / BK		\$	280.00	\$	560.0
11	2	HEADLAMP BRACKET LH/RH / MIS		\$	10.00	\$	20.0
12	1	BONNET / 00		\$	200.00	\$	200.0
13	2	BONNET HINGE LH/RH / BT		\$	22.00	\$	44.0
14	1	BONNET LOCK / CT_		\$	36.00	\$	36.0
15	21	FRONT CORNER PANEL LHARH) / DD	1	\$	55.00	\$	110.0
16	1	BRACE PANEL / 01		\$	22.00	\$	22.0
17	1	FRONT SUPPORT PANEL / DP		\$	140.00	\$	140.00
18	2	FRONT REINF BRACKET LH/RH / BT		\$	65.00	\$	130.00
19	2	TOW COVER / (M)		\$	12.00	\$	24.00
20	1	AIR CLEANER BOX / CK		\$	230.00	\$	230.00
21	1	FRONT WINDSCREEN GLASS / BR		\$	550.00	\$	550.00
22	1	THE IT WHILE CHARLES	NEC	\$	50.00	\$	50.00
23	1	WIPER GARNISH / CK		\$	175.00	\$	175.00
24	2	WIPER GARNISH LH/RH (SMALL)		\$	18.00	\$	36.00
25	1	WIPER LINK ASSY		\$	105.00	\$	105.00
26	1	WIPER MOTOR		\$	280.00	\$	280.00
27	1	FRONT DOOR RH / 00		\$	550.00	\$	550.00
28	2	FRONT DOOR HINGE RH X		\$	35.00	\$	70.00
29	1	FRONT DOOR WEATHERSTRIP RH		\$	65.00	\$	65.00
30	1	FRONT DOOR WINDOW REGULATOR RH		\$	85.00	\$	85.00
31	1	FRONT DOOR REGULATOR MOTOR RH		\$	220.00	\$	220.00
32	21	HARNESS ASSY, WIRING CASING LHARH	OR	\$	35.00	\$	70.00
33	1	WASHER TANK / CRY		\$	50.00	\$	50.00
34	1	RADIATOR SPARE TANK / CRY		\$	140.00	\$	140.00
35	1	RADIATOR / OD		\$	520.00	\$	520.00
36	1	CONDENSER / 00		\$	450.00	\$	450.00
37	1	A/C DISCHARGE HOSE / 01		\$	120.00		120.00
38	1	A/C SUCTION HOSE		\$	250.00		250.00
39	1	A/C LIQUID PIPE PAIN BLADE		\$	150.00		150.00
40	1	CONDENSER FAN BLADE		\$	65.00	\$	65.00
41	1	RADIATOR FAN BLADE		\$	65.00		65.00
42	2	RADIATOR FAN MOTOR		\$	350.00		700.00
43	1	RADIATOR FAN COWLING		\$	130.00		130.00
44	1	INTERCOOLER / 00		\$	440.00		440.00
45	1	INTERCOOLER BRACKET		\$	30.00		30.00
46	1	INTERCOOLER AIR GUIDE		\$	45.00		45.00
47	1	HEATER/AIRCONDITIONER UNIT		\$	950.00	\$	950.00

10	1 BLOWER ASSY	15	350.00	\$ 350.00
48	1 DASHBOARD ?	\$	380.00	\$ 380.00
50	1 DASHBOARD REINFORCEMENT	\$	260.00	\$ 260.00
51	1 DASHBOARD CENTER FINISHER (STATION (ON) / RR	\$	160.00	\$ 160.00
52	1 AIR FILTER BOX ASSY / PR	\$	220.00	\$ 220.00
53	1 FRONT OUTER MIRROR X	\$	100.00	\$ 100.00
54	0 0	5	-	\$
THE RESERVE AND ADDRESS OF THE PARTY OF THE		\$	9,305.00	\$ 10,282.00

TOTAL PRICE \$ 10,282.00
PLUS 10% \$ 1,028.20
SUB TOTAL PRICE \$ 11,310.20

S/No.	QTY	DESCRIPTION	CONDITION / REMARKS	UNIT S/NETT	TOTAL S/NETT
•	1	FRONT BUMPER CLIPS SET / PC		\$ 50.0	0 \$ 30 50.00
1	+ :	FRONT GRILLE CLIPS SET / 15 ALL		\$ 50.0	0 \$ 15 50.00
2	1	THOUSE CONTRACTOR		\$ 50.0	0 \$ 50.00
3	1	FRONT DOOR TRIMBOARD CLIPS SET X FRONT DOOR CO.REG. STICKER (RH)	Nec	\$ 30.0	4.5
4	21	THOM TO COME COME	11.	\$ 70.0	
5	1	TOWING FEE / NC			0 5 44 45.00
6	1	FRONT NO. PLATE / DT			
7	1	RADIATOR COOLANT / NCC			
8	21	WINDSCREEN SEALANT / NºC		\$ 80.0	
9	1	WINDSCREEN INNER SEAL / NO		\$ 30.0	ALCOHOL STATE OF THE STATE OF T
10	1	WINDSCREEN IU BRACKET / NC		\$ 20.0	0 \$ 20.00
11	-				\$ -
12					\$ -

TOTAL S/NETT \$ 475.00 \$ 585.00

#### **Labour Charges**

_	In the standard of the standar	15	2,500.00	1200
1	To cut & weld on damaged panels, RH panel and to panel beat and align	1	2,500.00	
	doors, inner panels and to replace damaged parts			-0/1
2	To check and rectify lighting and wire harness	\$	80.00	JV
3	To spray paint bonnet, front panel, front bumper, RH front door & affected areas	\$	2,000.00	800
Δ	To transfer door parts and mechanism	\$	150.00	50
5	To remove & refit radiator, condenser, other major components, top up A/C gas.	\$	250.00	\$ 150
6	To remove and refit dashboard, seat, carpet, upholstery to facilitate repairs (ρλη?)	\$	300.00	150
7	To remove and replace front windscreen	\$	150.00	120

TOTAL LABOUR

**Total Cost of Repairs** 

\$ 5,430.00 \$ 17,325.20

(Total parts + Total S/Nett + Total Labour Cost)

Steve (LKK) 9/12/21, 9.30a OD-M RC EXCEIT-? L/S M/ NL M/ 10 days

LKK Auto Consultants hence notify the Repairer of the following:

- . To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- . No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from insurance Company

Acknowledged by Repairer

Signature:

Date:

SJ0421C6000H / JP Knights Pte Ltd SJ0421C000011 OF FRINGHIS FIRE LID ENTRY DATE & TIME: 06/12/2021 12:41 (SGT) SUBMITTED BY: Kavi SUBNITTE (06/12/2021 12:41 (SGT))



# SINGAPORE ACCIDENT STATEMENT

Please report correctly the details of the accident to speed up the claims process.

Please report correctly the details of the accident to speed up the claims process.
 This Form must be completed by the Policyholder and/or the Authorised Driver
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for Investigation.
 This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

and that copies of this report will, for a ree, be made evaluable application by interested parties.

7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

## **ACCIDENT STATEMENT**

Date of Submission Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

06/12/2021 12:41 (SGT) 06/12/2021 07:40 (SGT) PIE, Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

**GBJ3590S** 

Singapore

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No

**Email Address** Mobile Phone No Alternative Phone No

PAN PACIFIC VAN & TRUCK LEASING PTE LTD

2XXXXX635R

ppemclaims@gmail.com (Phone) +65-86699531 (Office) +65-62840827

VEHICLE PARTICULARS

Manufacturer Model

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission

CC

Toyota Hiace

Employment

Commercial vehicle

Manual 2754

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy Policy Number

Cover Note Number

Yes D19MFL0005549\_02

Comprehensive

India International Insurance Pte Ltd

DRIVER

Name of Driver NRIC No

MUHAMMAD ABDUL HAFIZ BIN ABD MATIL SXXXX121D

Accident report SJ0421C6000H

Page 1 of 29

Date Of Birth
Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number

Alt. Phone Number
Email Address
Address
Address complement

Address complement
Postcode
Is the driver the policyholder?

If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

07/07/1984 Outdoor 14/11/2014

7 YEARS AND 1 MONTH

Male

(Phone) +65-86699531

ppemclaims@gmail.com

BLK 440A BUKIT BATOK WEST AVENUE 8 #05-715

651440

No

Employee

No

\*

## GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Chain Collision Clear Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Yes

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

No

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?

No

#### CIRCUMSTANCES OF ACCIDENT

ON THE 06/12/2021 AT AROUND 0740HRS, I VEHICLE A(GB.J3590S) WAS TRAVELLING ALONG PIE(TUAS) HEADING TO JALAN BAHAR ON THE RIGHT LANE. AS I WAS TRAVELLING, VEHICLE D(SMV7618C) BRAKED HARSHLY THEN VEHICLE C(SMP7239U) ALSO BRAKE HARSHLY RESULTING IN VEHICLE B(SLV9638T) REAR ENDED VEHICLE C AND I COULD NOT BRAKE IN TIME AS IT HAPPENED TO SUDDEN AND I REAR ENDED VEHICLE B. VEHICLE B DRIVER WAS CONVEYED TO THE NEAREST HOSPITAL. NO OTHER WAS INJURED AT THAT POINT OF TIME.

#### ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**



Page 2 of 29

Contact Number
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number SMP7239U Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 3**

SMV7618C Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

### INJURED PERSONS DETAILS

INJURED 1

Name of injured person DRIVER Gender Male Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained UNKNOWN Injured person in which vehicle? SLV9638T Were seat belts worn? Was this injured conveyed to hospital by ambulance? Yes



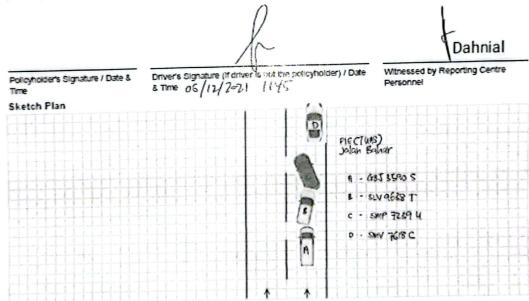
#### SKETCHPLAN

## IMPORTANT NOTICE

- s. Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2 This Form must be completed by the Policyholder and/or the Authorized Drivet. 3. Information provided must be as truthful and accurate as possible. Any willul mesrepresentation or withholding of material facts may
- 4. The issue and acceptance of this Formity Insurance companies is not an aigmission of policy tability on the part of the insurance
- 5 Any false reporting may be referred to the Police for Investigation.
- 6. The report will be forwanded by the insurers of the GLA Records Management Centre established by the General insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties
- T. By the sodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that

- (a) My Insurer , my w orkshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose (a) My Insurer , my w crisinop and the General insurance Association or singapore ( GIA ) may are permitted to direct, use, discussed and or process my personal data/personal information set out in this (form) and any other personal information provided by me or analyze process my personal data/personal information set out in this (form) and any other personal information possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) w he have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (i) processing, handling and/or dealing with my clams including the settlement of the daims and any necessary investigations relating to the claims.
- (II) Investigating the accident and/or my daims;
- (II) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (v) administering my daims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as wiell as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers lawyers/law firms, may/are permitted to collect, (collectively the "Purposes") use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



ON THE 06/12/2021 AT AROUND 0740HRS, I VEHICLE A(GBJ3590S) WAS TRAVELLING ALONG PIE(TUAS) HEADING TO JALAN BAHAR ON THE RIGHT LANE. AS I WAS TRAVELLING, VEHICLE D(SMV7618C) BRAKED HARSHLY THEN VEHICLE C(SMP7239U) ALSO BRAKE HARSHLY RESULTING IN VEHICLE B(SLV9638T) REAR ENDED VEHICLE C AND I COULD NOT BRAKE IN TIME AS IT HAPPENED TO SUDDEN AND I REAR ENDED VEHICLE B. VEHICLE B DRIVER WAS CONVEYED TO THE NEAREST HOSPITAL. NO OTHER WAS INJURED AT THAT POINT OF TIME.

Declaration

I/We declare the foregoing particulars are true in every respect

Policyholder's Signature / Date &

Driver's Signature (# onvel | 6 not the policyholder) / Date 8 Time 06/12/2021 (14T Witnessed by Reporting Centre Personnel

Dahnial

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